

## Position statement on the prescribing of complementary and alternative medicines

### **SW London CCGs\* do not support the routine prescribing of complementary and alternative medicines in line with NHS England's national guidance on medicines which should no longer be routinely prescribed**

Complementary and alternative medicines are treatments that are not considered to be mainstream healthcare. These medicines include herbal supplements, homeopathic preparations, aromatherapy, flower essence etc.

There is no universally agreed definition of complementary and alternative medicines. Although 'complementary and alternative' is often used as a single category, it can be useful to make a distinction between the two terms.

The US National Centre for Complementary and Integrative Health (NCCIH) uses this distinction:<sup>1</sup>

- When a non-mainstream practice is used together with conventional medicines, it is considered 'complementary'
- When a non-mainstream practice is used instead of conventional medicine, it is considered 'alternative'

### Rationale

- There is insufficient high quality evidence to demonstrate clinical effectiveness of complementary and alternative medicines. Some complementary and alternative medicines or treatments are based on principles and an evidence base that are not recognised by the majority of independent scientists.<sup>1</sup> Clinical Commissioning Groups (CCGs) will only prescribe at NHS expense or recommend interventions that are supported by evidence that demonstrates clinical and cost effectiveness.
- The National Institute of Health and Care Excellence (NICE) does not recommend homeopathy for the treatment of any health condition.<sup>2</sup>
- The South West London Effective Commissioning Initiative (SWL ECI) provides a set of patient criteria to inform the commissioning of clinical interventions in South West London. The policy on alternative/homeopathic/complementary therapies states 'there is absolute lack of well-conducted systematic reviews that permits any basic analyses of these therapies'.<sup>3</sup>
- A 2010 House of Commons Science and Technology Committee report on homeopathy said that homeopathic remedies perform no better than placebos, and that the principles on which homeopathy is based are 'scientifically implausible'. This is also the view of the Chief Medical Officer, Professor Dame Sally Davies.<sup>2</sup>
- The report by the Government Science and Technology Committee reviewed evidence for and against homeopathy and concluded that the NHS should cease funding homeopathy. It also concluded that the Medicines and Healthcare Products Regulatory Agency (MHRA) should not allow homeopathic product labels to make medical claims without evidence of efficacy. As they are not medicines, homeopathic products should no longer be licensed by the MHRA. The indications being that any beneficial outcomes of homeopathy treatment are due to a placebo effect.<sup>4</sup>
- South West London CCGs have accepted the effectiveness agenda and attempting to introduce unevaluated therapies would be a departure from this, more so since complementary and alternative therapies are not without side effects and complications.<sup>3</sup> No CCGs in South West London commission homeopathic services.

### References

1. NHS Choices. Your Health, your choices. Complementary and alternative medicine. <http://www.nhs.uk/Livewell/complementary-alternative-medicine/Pages/complementary-alternative-medicines.aspx>
2. NHS Choices. Your Health, your choices. Homeopathy. <http://www.nhs.uk/conditions/homeopathy/Pages/Introduction.aspx>
3. 2014/2015 SW London ECI. Appendix D. Policy on alternative/homeopathic/complementary therapies. Version 1.5 <http://www.parliament.uk/business/committees/committees-a-z/commons-select/science-and-technology-committee/inquiries/parliament-2005/homeopathy/>.
4. British National Formulary 72. September 2016 - March 2017

### Further information available from:

- NHS England. Items which should not routinely be prescribed in primary care: Guidance for CCGs. <https://www.england.nhs.uk/publication/items-which-should-not-be-routinely-prescribed-in-primary-care-guidance-for-ccgs/>. Updated November 2017.

\*SWL CCGs (NHS Croydon CCG, NHS Kingston CCG, NHS Merton CCG, NHS Richmond CCG and NHS Sutton CCG) position statement on complementary and alternative medicines

## Guidance for clinicians

### Recommendations:

- Complementary and alternative medicines should not be recommended or prescribed at NHS expense due to the lack of evidence for clinical effectiveness. There is a lack of robust, randomised controlled trials directly comparing complementary medicines with standard treatment.
- Use of complementary and alternative medicines could delay accurate diagnosis of an underlying pathology.
- NHS patients should **not** be referred to a complementary and/or alternative medical practitioner.
- Check if patients are taking any complementary or alternative therapies for **interactions and/or unwanted effects**. Some complementary and alternative medicines may be associated with adverse effects and may interact with other mainstream medicines/healthcare.
- Information on any aspect of drug therapy including complementary and alternative medicine that a patient has chosen themselves to take can be provided by telephoning the regional medicines information service. In London this medicines information service is provided by Guy's Hospital (tel: 020 7188 8750, 020 7188 3849 or 020 7188 3855).<sup>5</sup>

## Guidance for patients, carers and guardians

- If you think you may have a health condition, first see your community pharmacist or GP.<sup>2</sup>
- Use of alternative medicines could delay accurate diagnosis of your condition.
- Don't visit a complementary and alternative medical practitioner instead of seeing your GP.<sup>2</sup>
- Some complementary and alternative medicines may cause problems with conventional medicines you are taking. Always check with your GP or pharmacist for advice.<sup>2</sup>
- Further information on complementary and alternative medicines can be found at:  
<http://www.nhs.uk/Livewell/complementary-alternative-medicine/Pages/complementary-and-alternative-medicine.aspx>.

A patient information leaflet is also available: <https://www.prescqipp.info/items-which-should-not-routinely-be-prescribed-patient-leaflets>

**The NHS belongs to YOU, use it responsibly**

**Update at June 2017:**

Following questions about what is included in this category, please find below a list of items prescribed in SW London during 2016/17

- Almond Oil
- Clove Oil
- Cranberry eg Seven Seas, Valupak
- Coconut Oil
- Evening Primrose oil eg Seven Seas
- Eucalyptus Oil
- 5-HTP tablets
- Homeopathic Preparation - Proprietary
- Kalms Herbal Sedative tablets
- St Johns Wort Tab
- Lepicol powder
- MSM tablets
- Nytol Herbal Tablets
- Olive Oil / Oleax Olive Oil Ear Drops
- Omega-7 Sea Buckthorn Oil
- Peppermint Water BP 1973
- Peppermint Water Conc BP 1973
- Pernaton Gel
- Promensil tablets
- Solgar N-Acetyl-L-Cysteine V Capsule 600mg